

# REPORTING LABORATORY ADMINISTRATION REQUEST FORM (PWT A-001)

The use of this form applies to New Jersey certified laboratories submitting well test results in compliance with the Private Well Testing Act (N.J.A.C. 58:12A-26 et seq.), the Private Well Testing Act Regulations (N.J.A.C. 7:9E) and the Regulations Governing the Certification of Laboratories and Environmental Measurements (N.J.A.C. 7:18).

Prior to submission of this form you may create a User Profile for the NJDEP-Online Portal at [www.njdeponline.com](http://www.njdeponline.com). If created, please specify the User ID below. Please complete one form for each laboratory for which you are requesting administration access.

## **Section A: PWT A Laboratory Information**

Laboratory ID#: \_\_\_\_\_  
(Laboratory Certification Program)

Laboratory Name (As it appears on your Certificate): \_\_\_\_\_

Street Address (Physical Location): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address (If different from above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## **Section B: PWT A Laboratory Administrator Information and Certification** (Note: You must be an employee of the above laboratory)

Name of Manager Requesting PIN Code: \_\_\_\_\_ Title: \_\_\_\_\_ E-mail address: \_\_\_\_\_ @  
Phone: \_\_\_\_\_ User ID (if previously established in User Profile, if applicable): \_\_\_\_\_

Name of Quality Assurance Officer Requesting PIN Code: \_\_\_\_\_ Title: \_\_\_\_\_ E-mail address: \_\_\_\_\_ @  
Phone: \_\_\_\_\_ User ID (if previously established in User Profile, if applicable): \_\_\_\_\_

"I certify under penalty of law that I believe the information provided in this document is true, accurate, and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

\_\_\_\_\_  
Signature of Manager

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Quality Assurance Officer

\_\_\_\_\_  
Date

## **Section C: Responsible Official Certification**

A Responsible Official is defined in N.J.A.C. 7:18-1.9 is as follows:

- For a corporation: A principal executive officer of at least the level of vice president.
- For a partnership: A general partner.
- For a sole proprietorship: The proprietor
- For a government agency: Either a principal executive officer or his or her designee.

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attached documents and, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

\_\_\_\_\_  
Responsible Official Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Responsible Official Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone #

Return to: NJDEP – OQA  
PO Box 424  
Trenton, NJ 08625-0424  
Attn: Michael DiBalsi fax 609.777.1774

For DEP Use Only

Processed By \_\_\_\_\_ Date \_\_\_\_\_

Approved Yes \_\_\_\_\_ No \_\_\_\_\_

Last Updated: 09-16-02